

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation League of Conservation Voters Inc		3. FEC Identification Number <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C90005786 </div>			
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1920 L St NW #500					
(c) City, State and ZIP Code Washington DC 20036					
2.	Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<table style="width: 100%; border: none;"> <tr> <td style="width: 5%; border: none;">Individual filers only</td> <td style="border: none; width: 65%;">Name of Employer</td> <td style="border: none; width: 30%;">Occupation</td> </tr> </table>			Individual filers only	Name of Employer	Occupation
Individual filers only	Name of Employer	Occupation			

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☒ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M / D D / Y Y Y Y

0 8 / 0 9 / 2 0 0 8

THROUGH

M M / D D / Y Y Y Y

0 8 / 2 4 / 2 0 0 8

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES.....

20047.25

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Patrick Collins

08/26/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters Inc

Full Name (Last, First, Middle Initial) of Payee
Comcast Cable

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	0	8

Mailing Address
1601 Mile High Stadium Circle

Amount

20047.25

City	State	Zip Code
Denver	CO	80204

Purpose of Expenditure
Media buyCategory/
Type

Office Sought:

☐

House

State: CO

Senate

☒

Senate

District: 00

☐

President

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
ROBERT W SCHAFFERCalendar Year-To-Date Per Election
for Office Sought

54200.25

Disbursement For:
2008☐

Primary

☒

General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

20047.25

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

20047.25